Submitted Submitted With Initial OR File	ICATION I.63)	First Named Invento C Application Number	OMPLET	ils Zander E IF KNOWN	
(37 CFR 2	1.63)			E IF KNOWN	
Declaration X De Submitted with Initial OR Fil		Application Number	40/705		
Submitted Submitted With Initial OR File	oclaration		110/735,9	/735,975	
with Initial OR Fil		Filing Date	Decemb	per 15, 2003	
Eiling (2)	Submitted after Initial Filing (surcharge	Group Art Unit	N/A		
	7 CFR 1.16 (e)) quired)	Examiner Name	Not Yet Assigned		
As a below named inventor My residence, mailing address,	· _		me.		
I believe I am the original and fi	•	•		ich a patent is sought o	
OSTEOSYNTHETIC A	ID				
the specification of which	(Ti	itle of the Invention)		•	
is attached hereto					
OR	·			•	
x was filed on (MM/DD/Y	YYY) 12/15/2003	3 as United States	Application	n Number or PCT Inte	
Application No. 10/	735,975 and wa	s amended on (MM/DD	/ / / / //////////////////////////////	(if	
I hereby state that I have review amended by any amendment sp			itified speci	ification, including the	
I acknowledge the duty to discl	ose information which is n	material to patentability as			
continuation-in-part applications the national or PCT internationa			ween the fil	ling date of the prior ap	
I hereby claim foreign priority be inventor's or plant breeder's rigl country other than the United S application for patent, inventor's before that of the application or	nts certificate(s), or 365 (a tates of America, listed be s or plant breeder's rights	a) of any PCT international elow and have also identificate(s), or of any Po	al application	on which designated at by checking the box, a	
Prior Foreign Application		Foreign Filing Date	Priority		
	A				
Number(s) 20219683.6	Country	(MM/DD/YYYY) 12/19/2002	Not Claim	ned YES	

PTO/SB/01 (03-01)
Please type a plus sign (+) inside this box

Approved for use through 10/31/2002. OMB 0651-0032
U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE
Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it contains a valid OMB control number.

DECLARATION — Utility or Design Patent Application								
			ollowing registered practice connected therewith:	titioner(s) to prosecute this application and to Customer Number 000530				
Direct all correspondence to: X Customer Number or Bar Code Label			000530	OR Correspondence address below				
Name								
Address								
City			State	ZIP				
				_				
Country I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.								
NAME OF SOLE OR FIRST INVENTOR:			A petition I	A petition has been filed for this unsigned inventor				
Given Name (first and middle [if any])	Nils		Family Name or Surname	Zander				
Inventor's Signature	1		Date 22.01.2004					
Eckernförde Residence: City	State	Germany Country		Germany Citizenship				
Mailing Address: Geschwister-Scholl-Strasse 99								
Eckernförde City	State	ZIP	D-24340	Germany Country				
NAME OF SECOND INVENTOR:		A petition has been filed for this unsigned inventor						
Given Name (first and middle [if any])	Axel		Family Name or Surname	Cremer				
Inventor's Signature	~			Date 22.01. 2004				
Fahrenkrog Residence: City	Germany State Country			Germany Citizenship				
Mailing Address: Steinkamp 11								
Fahrenkrog City	State	ZIP	D-23795	Germany Country				
X Additional inventors are being named on the1 supplemental Additional Inventor(s) sheet(s) PTO/SB/02A attached hereto.								

PTO/SB/02A (08-03)
Approved for use through 07/31/2006. OMB 0651-0032
U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE
Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it contains a valid OMB control number.

			ADDITIONAL INVENTOR(S) Supplemental Sheet Page 1 of 1					
Name of Additional Joint Inventor, if any: A petition has been filed for this unsigned inventor								
Given Name (first and middle (if any))				Family Name or Surname				
Michael			Seemann					
Inventor's Signature		•	-		Date 22.01.2004			
Altenholz Residence: City	State	tate		iy	Germany			
Mailing Address: Freesenberg 45								
Altenholz City	State .	Zip	D-2416	1	Germany			
Name of Additional Joint Invento	or, if any:	A petition		A petition h	nas been filed for this unsigned inventor			
Given Name (first and	middle (if any))			F	Family Name or Surname			
Inventor's Signature					Date			
Residence: City	State	Cour	Country		Citizenship ·			
Mailing Address:								
City	State	Zip			Country			
Name of Additional Joint Inventor, if any:				A petition has been filed for this unsigned inventor				
Given Namę (first and middle (if any))				F	Family Name or Surname			
Inventor's Signature				Date				
Residence: City	State	Country			Citizenship			
Mailing Address:								
City	State	Zip	Zip .		Country			
Name of Additional Joint Inventor, if any:			A petition h	etition has been filed for this unsigned inventor				
Given Name (first and	d middle (if any))			F	Family Name or Surname			
Inventor's								
Signature				Date				
Residence: City	idence: City State Country			Citizenship				
Mailing Address:								
City	State	Zip			Country			